

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16(e))
required)

Attorney Docket Number

37505.0268

First Named Inventor

Syracuse, et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Discharge Methodologies For Optimizing The Performance Of Lithium/Silver Vanadium Oxide Cells

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application (Numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/409,150	September 9, 2002	

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

**U.S. Parent Application or PCT Parent
Number**

**Parent Filing Date
(MM/DD/YYYY)**

**Parent Patent Number
(if applicable)**

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner's name/registration number listed below

Place Customer Number
Bar Code Label Here

Name

Registration No.

Name

Registration No.

Michael F. Scalise

34,920

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto

Direct all correspondence to: ☒ Customer Number
or Bar Code Label

33751

OR

☐ Correspondence address below

Name

Michael F. Scalise

Address

Wilson Greatbatch Technologies, Inc.

Address

10,000 Wehrle Drive

City

Clarence

State

New York

ZIP

14031

Country

United States

Telephone

(716) 759-5810

Fax

(716) 759-5074

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Kenneth

Syracuse

**Inventor's
Signature**



Date

08 Sept 2003

Residence: City

Williamsville

State

New York

Country

USA

Citizenship

USA

Post Office Address

Post Office Address

94 Eastwick Drive

City

Williamsville

State

New York

ZIP

14221

Country

USA

☐ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Noelle				Waite			
Inventor's Signature	<i>Noelle M. Waite</i>					Date	9/8/03
Residence: City	Clarence Center	State	New York	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	8920-A Roll Road						
City	Clarence Center	State	New York	ZIP	14302	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Hong				Gan			
Inventor's Signature	<i>[Signature]</i>					Date	9/9/03
Residence: City	East Amherst	State	New York	Country	USA	Citizenship	USA
Post Office Address	148 Newcastle Court						
Post Office Address	22 Odessa Court						
City	East Amherst	State	New York	ZIP	14051	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Esther S.				Takeuchi			
Inventor's Signature	<i>Esther S. Takeuchi</i>					Date	9/9/03
Residence: City	East Amherst	State	New York	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	38 San Rafael Court						
City	East Amherst	State	New York	ZIP	14051	Country	USA

+